

CONTROL NO.

REPORTS INVENTORY					
PREPARE IN DUPLICATE					
1. TITLE OF REPORT (If a fill-in report include Form No.)  Advance Staffing Plan				2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA <input checked="" type="checkbox"/> PERSONNEL <input type="checkbox"/> LOGISTICS <input type="checkbox"/> MEDICAL		<input type="checkbox"/> TRAINING <input type="checkbox"/> SECURITY <input type="checkbox"/> FINANCE		ADMIN. GENERAL OTHER (specify)	
4. NO. OF COPIES PREPARED  8		5. FREQUENCY (weekly, monthly, quarterly, etc.)  Annual, plus 1 revision.		6. DISTRIBUTION (No. of components not number of copies)  3	
7. FORMAT (memorandum, form computer print-out, etc)  memorandum		8. ADP PROCESSING <input type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <input checked="" type="checkbox"/> NO		9. DIRECTIVE AUTHORITY REQUIRING REPORT  D/Pers	
10. PREPARING COMPONENT (include lowest level contributing information to report)  DDS/OP/SPD			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)  Estimates, oral and written, from all operating components as to anticipated manpower needs.		
12. COST FACTORS					
A. MANUAL PREPARATION AND REVIEW COSTS					
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED = COST PER YEAR
GS-06 to GS-15	\$5.00	80	=	\$400.00	2 = \$800.00
B. COSTS OF COMPUTER PRODUCED REPORTS					
TOTAL COSTS PER YEAR					
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.  A necessary part of manpower requirements planning -- supports workload projections in recruitment and processing.					
14. FUTURE GOALS					
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE				ESTIMATED SAVINGS MAN-HOURS DOLLARS STAT	
16. DATE OF INVENTORY  9/21/70		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION  DD/Pers/R&P			18. EXTENSION  <input type="checkbox"/>

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